

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**CARSON AMERICA****A. Full Name (Last, First, Middle Initial)****TONY LAMPROPOULOS**Mailing Address **615 BRYANT AVE**City  
**ROSLYN**State  
**NY**Zip Code  
**11576-1147**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**PANO LLC**Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00****Transaction ID : SA17.64929**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	5

**CONTRIBUTION**

Amount of Each Receipt this Period

**250.00****B. Full Name (Last, First, Middle Initial)****TONY LAMPROPOULOS**Mailing Address **615 BRYANT AVE**City  
**ROSLYN**State  
**NY**Zip Code  
**11576-1147**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**PANO LLC**Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00****Transaction ID : SA17.84811**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	5

**CONTRIBUTION**

Amount of Each Receipt this Period

**100.00****C. Full Name (Last, First, Middle Initial)****LAURENCE LANCASTER**Mailing Address **2621 2ND AVE N**City  
**SEATTLE**State  
**WA**Zip Code  
**98109-1808**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**RETIRED**Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**450.00****Transaction ID : SA17.96916**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	5

**CONTRIBUTION**

Amount of Each Receipt this Period

**200.00****Subtotal Of Receipts This Page (optional)**.....**550.00****Total This Period (last page this line number only)**.....